#### STATE OF NEW HAMPSHIRE

#### 2017 Statement of Income and Expenses for LOBBYISTS (RSA Chanter 15)

# RECEIVED

OCT 25 2017

NEW HAMPSHIRE DEPARTMENT OF STATE

(RSA Chapter 15)
PLEASE PRINT

1. Name of 100	bbyist's partnership, firm or co	orporation, if any:		
Bianco P	rofessional Association			
	(Name of partnership, firm or co	rporation)	4 AT MT 444	
18 Centr	re Street	Concord	NH	03301
Susiness Address	s: (Street)	(Town/City)	(State)	(Zip Code)
603 225-7: (Telep	170(603)	226-0165 (Fax)	e-mail_attys@bi	ancopa.com
	nent covers; (Choose one – file			/ file a separate repo
cportable exp	ense transactions which are no	ot attributable to an	y one client).	
<b>く</b> All reportab	ole transactions occurring in the	months prior to the r	eporting date relative to the	following elient:
Coalition o	of Insurance and Financi	al Producers		
	(Full Name of Client as it	appears on the Lobbyis	t Registration Form)	
<u>)R</u>				
	de transactions by the lobbyist (i y particular elient.	neluding the lobbyist	's family), or the lobbying	firm listed below whi
	, Tannaman anama			
V. Date of Re			July 26, 2017	
leports cover:	activity from date of registration	ı to 3/31/17 — — ac	tivity from 4/1/17 to 6/30/17	
	October 25, 2017 X  activity from 7/1/17 to 9/30	V17 a	January 31, 2018 ; ctivity from 10/1/17 to 12/31/1	17
	e been no fees received and weeked, complete just this form an			
oncord, NH 0:		ac samu u to me se	creatively indices of the control	ere rivase, ittom 20 r
	dditional reports are attached:			
		•		nenses
VI. Check if ac	•	ures, vou must lile A	iddendum A— Fees and Exj	
VI. Check if ac	e received fees or made expendit e paid an honorarium or reimbur			
VI. Check if ac If you have If you have expense Reimb	e received fees or made expendit e paid an honorarium or reimbur oursement	sed expenses, you mi	ast file <b>Addendum B</b> Rep	ort of Honorariums o
VI. Check if ac If you have If you have expense Reimb	e received fees or made expendit e paid an honorarium or reimbur	sed expenses, you mi	ast file <b>Addendum B</b> Rep	ort of Honorariums o
VI. Check if ac If you have If you have expense Reimb	e received fees or made expendit e paid an honorarium or reimbur oursement	sed expenses, you mi	ast file <b>Addendum B</b> Rep	ort of Honorariums o
If you have If you have If you have expense Reimb If you, you	e received fees or made expendit e paid an honorarium or reimbur oursement or firm, or your family has made	sed expenses, you mi	ast file <b>Addendum B</b> Rep	ort of Honorariums o
If you have If you have ixpense Reimb If you, you	e received fees or made expendit e paid an honorarium or reimbur oursement	sed expenses, you mi	ast fi <b>le Addendum B</b> Rep as, you must file <b>Addendu</b> n	ort of Honorariums o n <b>C</b> - Political Contril
If you have ixpense Reimb If you, your	e received fees or made expendit e paid an honorarium or reimbur oursement or firm, or your family has made ent/Affirmation by Lobbyist	sed expenses, you mi political contribution I RSA 664 and hereb	ast fi <b>le Addendum B</b> Rep as, you must file <b>Addendu</b> n	ort of Honorariums o n <b>C</b> - Political Contril
If you have ixpense Reimb If you, your	e received fees or made expendite paid an honorarium or reimbur oursement or firm, or your family has made ent/Affirmation by Lobbyist A 15, RSA 14-C and	sed expenses, you mi political contribution I RSA 664 and hereb	ast fi <b>le Addendum B</b> Rep as, you must file <b>Addendu</b> n	ort of Honorariums o n <b>C</b> - Political Contril
If you have ixpense Reimb If you, your	e received fees or made expendite paid an honorarium or reintbur oursement or firm, or your family has made ent/Affirmation by Lobbyist A 15, RSA 15-B, RSA 14-C and the best of myknowledge and	sed expenses, you mi political contribution I RSA 664 and hereb	ast fi <b>le Addendum B</b> Rep as, you must file <b>Addendu</b> n	ort of Honorariums o n <b>C</b> - Political Contril

#### STATE OF NEW HAMPSHIRE



### **Lobbyists Fees and Expenses** Addendum A

(RSA Chapter 15:6)

Bianco Professional Association		
(Name of partnership, firm or corporation)		
III. Name of Client Coalition of Insurance and Financial Produce	ers <sub>Dai</sub>	te 10/25/17
IV, Fees Received Indicate the gross amount of all fees received from the client identified abo to lobbying, including fees for services such as public advocacy, governme including research, monitoring legislation, and related legal work. The reduced by any expenses:	ent relation	is, or public relations ser-
a) Total of all fees received in this reporting period	a) \$	4,370
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar		20,850
c) Total of all fees received to date (Add lines a and b)	c) \$	25,220
d) Indicate the amount of any such fees that are due, but have not		465
yet been paid	d) \$	403
V, Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report Expenses are to be reported in one of three entegories of expenses: (a) during the reporting period for salaries, benefits, support staff, and office individual expenses where the expenditure was of \$25.00 or less (for examinate where the cost was \$25.00 or less, purchase of a pen with a value of being labbied, purchase of a ceremonial object given to a person being lobb (c) an itemized statement of each individual expenditure made during this reany purpose not covered by (a) (for example: purchase of a meal with veceremonial object to be given to the subject of lobbying with a value gre restaurant expenses for a legislative reception). Expenses for honorariur contributions will be reported on separate addendums and should not be reported.	report all of helient and the aggreg expenses; apple: meals less than folion with a exporting pealue of grater than forces, expens	expenses made from lobbled if expenditures are made filed for the lobbyist(s), ate total of all expenses (b) the aggregate total of spurchased during a bus \$10 that is given to the polyvalue of \$25.00 or less) riod of greater than \$25.0 eater than \$25, purchase \$25, but not greater than se reimbursement, or poly
V, Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to a fees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s) firm that are unrelated to any one client a separate report Expenses are to be reported in one of three entegories of expenses: (a) during the reporting period for salaries, benefits, support staff, and office individual expenses where the expenditure was of \$25.00 or less (for examblanch where the cost was \$25.00 or less, purchase of a pen with a value of being lobbied, purchase of a ceremonial object given to a person being lobbied, purchase of a ceremonial object given to a person being lobbied, purpose not covered by (a) (for example: purchase of a meal with veceremonial object to be given to the subject of lobbying with a value gre restaurant expenses for a legislative reception). Expenses for honorariur contributions will be reported on separate addendums and should not be reported and office expenses, related directly or indirectly to lobbying.	report all of the effect and the aggreg expenses; uple: meals less than shorting perature of grater than shorted on Adaptive all \$	expenses made from lobbled if expenditures are made filed for the lobbyist(s), ate total of all expenses (b) the aggregate total of spurchased during a bus \$10 that is given to the polyvalue of \$25.00 or less) riod of greater than \$25.0 eater than \$25, purchase \$25, but not greater than se reimbursement, or poly
V, Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s) firm that are unrelated to any one client a separate report Expenses are to be reported in one of three entegories of expenses: (a) during the reporting period for salaries, benefits, support staff, and office individual expenses where the expenditure was of \$25.00 or less (for examinate where the cost was \$25.00 or less, purchase of a pen with a value of being lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this reamy purpose not covered by (a) (for example: purchase of a meal with vecremonial object to be given to the subject of lobbying with a value gre restaurant expenses for a legislative reception). Expenses for honorariur contributions will be reported an separate addendums and should not be reported.  Total aggregate expenses for this reporting period for salaries, benefits.	report all of the effect and the aggreg expenses; uple: meals less than shorting perature of grater than shorted on Adaptive all \$	expenses made from lobbled if expenditures are made filed for the lobbyist(s) attention to the lobbyist(s) attention of all expenses (b) the aggregate total of spurchased during a bus \$10 that is given to the period of greater than \$25.00 or less) riod of greater than \$25.0 center than \$25, purchase \$25, but not greater than se reimbursement, or poldendum A.

	s for this reporting per es a, b and c)	iod	d) \$ 0,313 _			
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's repor						
f) Total of all ex	penses year to date		0.\$ 25,685			
		enditures of more than \$25 made hom charged.	rom lobbying fees duri	ng this reporting		
Paid to:			Amount			
			\$			
			\$ _			
			\$			
		code mile a complete	\$			
-	···	·	\$	AND ALLERS		
			_ \$			
Sworn Stateme	nt/Affirmation by l	Lobbyist				
		KSV 664 and hereby swear or v knowledge and belief.	affirm that the forego	oing information		
		\M_	10/25/1	7		
(Signature of lo	obbyist)	HV -	(1)ate	)		
James J. Biar		V				
(Print Name of	lobbyist)					

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# State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lohbying partnership, firm,	or corpor	ration: Bianco Profes	sional Association
Name of Client (leave blank if Stater			
particular client): Coalition of Ins	urance	and Financial Produc	pers
Date of Report (check one):			
April 26, 2017   July 26, 20	17 🗆	October 25, 2017 🛣	January 31, 2018 □
I have read RSA 15, RSA 15-B, RS the following Addendums submitted submitted):			•
Addendum A(s).			
Addendum B(s).			
Addendum C(s).			
I hereby swear or affirm that the forecomplete to the best of my knowledg			, , , , ,
(Signature of lobbyist)		<u></u>	(Date)
Adam Schmidt			
(Print Name of lobbyist)			

## State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or corporation: Bianco_	Professional Association
Name of Client (leave blank if Statement is for the partnership.	
particular elient): Coalition of Insurance and Financial	Producers
Date of Report (check one):	
April 26, 2017 □ July 26, 2017 □ October 25, 20	117 ▼ January 31, 2018 □
I have read RSA 15. RSA 15-B, RSA 664, the Statement of I the following Addendums submitted with that Statement (ins submitted):	
Addendum A(s).	
Addendum B(s).	
Addendum C(s).	
I hereby swear or affirm that the foregoing information on the complete to the best of my knowledge and belief.	Statement and each Addendum is true and
(Signature of lobbyist)	10/15/17
	(Date)
Karen Soucy	
(Print Name of lobbyist)	

# State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or corporation: Bianco Professional Association
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): Coalition of Insurance and Financial Producers
Date of Report (check one):
April 26, 2017 □ July 26, 2017 □ October 25, 2017 ☑ January 31, 2018 □
I have read RSA 15. RSA 15-B. RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):
Addendum A(s).
Addendum B(s).
Addendum C(s).
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.
(Signature of lobbyist)  19 (Ctbe: 2017 (Date)
Kathy Corey Fox
(Print Name of lobbyist)